FEC FORM 1

STATEMENT OF ORGANIZATION

| FORM 1 | (See instructi | | Office use only |
|-------------------------------|--|---|---------------------|
| NAME OF COMMITTEE (in | full) (Check if name is changed) | Example: If typying, type over the lines | 12FE4M5 |
| DEMOCRATS | FOR EDUCATION REFORM | | |
| | | | |
| | 1217 MASSACHUSI | ETTS AVE NW | |
| ADDRESS (number and | street) | | |
| (Check if address is changed) | | tructions) Ciffice use only The Example: If typying, type over the lines TOTAL STATE TOTAL ZIP CODE CITY STATE TOTAL ZIP CODE CITY AMENDED (A) The Example: If typying, type over the lines TOTAL STATE TOTAL ZIP CODE AMENDED (A) | |
| is changed) | WASHINGTON | | |
| | | CITY▲ | STATE▲ ZIP CODE ▲ |
| COMMITTEE'S E-MA None | IL ADDRESS | | |
| | | | |
| | | | |
| | PAGE ADDRESS (URL) | | |
| None | | | |
| | | | |
| COMMITTEE'S FAX | NUMBER | | |
| با لبنا | | | |
| 2. DATE M 0 5 | 1 4 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | | |
| 3. FEC IDENTIFICA | ATION NUMBER | C C00417733 | |
| 4. IS THIS STATEM | MENT X NEW (N) OR | AMENDED (A) | |
| I certify that I have exam | ined this Statement and to the best of my kr | nowledge and belief it is true, correct a | and complete |
| Type or Print Name of | Treasurer Amy Wilkins | | |
| Signature of Treasure | r Electronically Filed by Amy Will | kins | Date 05 14 / Y 2006 |
| NOTE: Submission of fa | alse, erroneous, or incomplete information m | ay subject the person signing this Sta | • |
| Office Use Only | | For further information Federal Election Commis Toll Free 800-424-9530 | |